

6TH grade ASSESSMENT RETAKE FORM

STUDENT FIRST & LAST NAME: _____

CIRCLE ASSIGNING TEACHER NAME: Ernst Chevalier Geerer

Golitko Goloweyco McDonald McKinney Nyenhuis Sabella

Circle Class Subject: Informational Math Narrative Science Social Studies Hour: _____

Assessment Name: _____ Original Score: _____

Date of ORIGINAL Assessment: _____ Date of RETAKE: _____

⇒ Staple this COMPLETED form to your ORIGINAL assessment.

⇒ Turn it in to the ASSIGNING teacher BEFORE attending 7th hour testing.

⇒ Retakes are available every Thursday in room #100 from 3:25—4:15 during the 7th hour testing session.

Write in complete sentences using capitalization and punctuation.

Why I was not prepared for the original assessment:

Specific strategies including time frames that I will use to prepare and improve BEFORE attending 7th hour testing:

Parent/Guardian Printed Name: _____ Date: _____
Parent/Guardian Signature: _____